PART B - FEE(S) TRANSMITTAL

Complete and send t	his form, together wit	th applicable for	de(a), Ea. T	Commissioner	UE FEE for Patents	
4		NUL.	16 2005 _r }	P.O. Box 1450 Alexandria, Vi	irginia 22313-1450	
INSTRUCTIONS: This for appropriate. All further cor indicated unless corrected to maintenance fee notification	m should be used for transcrespondence including the below or directed otherwise is.	smitting to ISSU Patent, ad tice or in Block No. (a	E FEE and ders and near		equired). Blocks 1 through 5 s will be mailed to the curren ess; and/or (b) indicating a sep	should be completed where t correspondence address as parate "FEE ADDRESS" for
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06/20/2005 HALI22 000	000156 033975 107665	42		(Depositor's name)		
01 FC:1501 1400.00 DA 02 FC:1504 300.00 DA 03 FC:8001 9.00 DA				(Signature) (Date)		
APPLICATION NO.	FILING DATE	FIRST NAMED) INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/766,542	01/29/2004	Toshiyuki		Nagaoka	061069-0307481	3106
TITLE OF INVENTION: LI	IGHT WEIGHT HEAD MO	UNTED IMAGE I	DISPLAY DE	VICE		
APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700	06/20/2005
EXAMINER		ART UNIT		CLASS-SUBCLASS		
HARRINGTON, ALICIA M 25				359-630000	<u> </u>	
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Pillsbury Winthrop Sha Pittman LLP 2 3			
3. ASSIGNEE NAME AND						
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion of	clow, no assignee of this form is NOT	data will app Γa substitute	ear on the patent. If an ass for filing an assignment.	ignee is identified below, the	document has been filed for
(A) NAME OF ASSIGNI	EE	(B	B) RESIDENCE: (CITY and STATE OR COUNTRY)			
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Please check the appropriate	· 				Corporation or other private gr	oup entity Government
4a. The following fee(s) are	enciosea:		b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed.			
	mall entity discount permitte	ed)	Payment by credit card. Form PTO-2038 is attached. 061069-0307481			
Advance Order - # of	Copies 3		The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to beposit Account Number (enclose an extra copy of this form).			
5. Change in Entity Status a. Applicant claims SN	(from status indicated above)			ALL ENTITY status. See 37 C	
The Director of the USPTO	is requested to apply the Issuablication Fee (if required) w	e Fee and Publicat	ion Fee (if an	v) or to re-apply any previo	usly paid issue fee to the applic egistered attorney or agent; or t	ation identified above.
Authorized Signature	MI			Date	June 16, 2005	
Typed or printed name	Jeffrey D. K	arceski		Registrati	on No35914	
an application. Confidentiali submitting the completed ap this form and/or suggestions Box 1450, Alexandria, Virgi Alexandria, Virginia 22313-	ty is governed by 35 U.S.C. plication form to the USPT6 for reducing this burden, sh nia 22313-1450. DO NOT \$1450.	122 and 37 CFR 1 O. Time will vary ould be sent to the SEND FEES OR C	.14. This coll depending up Chief Inform OMPLETED	lection is estimated to take I on the individual case. Any nation Officer, U.S. Patent a FORMS TO THIS ADDRE	by the public which is to file (an 2 minutes to complete, including comments on the amount of the trademark Office, U.S. Departments of the commissioner of the displays a valid OMB control of the public ways.	ng gathering, preparing, and me you require to complete aurtment of Commerce, P.O. for Patents, P.O. Box 1450,